OLIFF & BERRIDGE, PLC

Divisional

101246.04

Utility

Application Data Sheet

Application Information

Application Type::

Subject Matter::

CD-ROM or CD-R:

Title::

None

PACKAGE ASSEMBLY WITH APPLICATOR AND

CONTAINER FOR ADHESIVE MATERIALS

Attorney Docket Number::

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity::

8

No

Applicant Information

Applicant Authority type::

Inventor

Primary Citizenship Country::

United States

Status::

Full Capacity

Given Name::

Keith

Middle Name::

R.

Family Name::

D'ALESSIO

Name Suffix::

City of Residence::

Cary

State or Province of Residence::

North Carolina

Country of Residence::

USA

Applicant Authority type::

Inventor

Primary Citizenship Country::

United States

Status::

Full Capacity

Given Name::

Gary

Middle Name::

F

Family Name::

PROKOP

Name Suffix::

City of Residence::

Wheaton

State or Province of Residence::

Illinois

Country of Residence::

USA

Applicant Authority type:: Inventor Primary Citizenship Country:: **United States** Status:: **Full Capacity** Given Name:: Leonard F Middle Name:: Family Name:: **CZUBA** Name Suffix:: City of Residence:: Lombard State or Province of Residence:: Illinois USA Country of Residence:: Inventor Applicant Authority type:: Primary Citizenship Country:: **United States** Status:: **Full Capacity** Given Name:: Carl Middle Name:: Ε Family Name:: **Behrend** Name Suffix:: City of Residence:: Chicago State or Province of Residence:: Illinois **USA** Country of Residence:: Inventor Applicant Authority type:: **Primary Citizenship Country:: United States** Status:: Full Capacity Given Name:: Peter

Family Name::

Middle Name::

KOPEC

J

Name Suffix::

City of Residence:: Park Ridge

State or Province of Residence:: Illinois
Country of Residence:: USA

Correspondence Information

Correspondence Customer Number:: 27049

Domestic Priority Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	Divisional of	09/987,116	November 13, 2001
Assignee Information			
Assignee Name:: Street of mailing address::		Closure Medical Corporation 5250 Greens Diary Road	
City of mailing address:: State or Province of mailing address:: Country of mailing address:: Postal or Zip Code of mailing address::		North Carolina USA 27616	